24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Independence USA PAC	C C00532705
Check If X 24-hour report 48-hour report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee SKDKnickerbocker	Date
Mailing Address 1818 N. St. NW	02 / 11 / 2013
Suite 450	mount
City State Zip Code	36732.50
Washington DC 20036	ansaction ID : SE.4364
Purpose of Expenditure Direct Mail Services Category/ Type Office S	Sought: House State: IL
	President District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: DEBORAH HALVORSON Check	
Calefluar Fear-To-Date Fer Election	ement For: Primary General
for Office Sought	Other (specify) Special-Primary
Full Name (Last, First, Middle Initial) of Payee Date	
SKDKnickerbocker	02 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1818 N. St. NW	
Suite 450	mount
City State Zip Code Washington DC 20036	25000.00 ansaction ID : SE.4365
Purpose of Expenditure Internet Advertising and Production Category/ Type 004	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
DEBORAH HALVORSON Check	One: Support Oppose
1333507 46 2013	ement For: Primary General Other (specify) Special-Primary
(a) SUBTOTAL of Itemized Independent Expenditures	61732.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	61732.50
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Diane Gubelli [Electronically Filed] Date 02	12 2013
Signature	